



**Extraction Oil & Gas, LLC**  
370 17<sup>th</sup> Street, Suite 5300  
Denver, CO 80202

November 19<sup>th</sup>, 2015

Town of Erie  
645 Holbrook St.  
P.O. Box 750  
Erie, CO 80516

Re: Notice of Intent to Plug and Abandon Existing Oil & Gas Well

This is a courtesy notice to make the Town of Erie aware of our intent to plug and abandon an oil and gas well located within Erie's municipal boundary. We feel it is important to provide such notice of our proposed activities should any questions arise. Extraction Oil & Gas plans to perform the proposed operation on the following well:

**Hippen 1-32**

**05-123-11395**

**NWNW-Sec 32-1N-68W**

This P&A proposal, approved by the COGCC on November 3<sup>rd</sup>, 2015, will require the use of a small service rig. All access to this location is limited to the access road and all work will be done during daylight hours. We anticipate this activity taking approximately one week to complete.

If you have questions, please contact Extraction Oil & Gas at 720-557-8300.

Thank You,

**Extraction Oil & Gas, LLC**

FORM  
6Rev  
12/05

# State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400919008

Date Received:

## WELL ABANDONMENT REPORT

This form is to be submitted as an Intent to Abandon whenever an abandonment is planned on a borehole. After the abandonment is complete, this form shall again be submitted as a Subsequent Report of the actual work completed. The approved intent shall be valid for six months after the approval date, after that period, a new intent will be required. Attachments required with the Intent to Abandon are wellbore diagrams of the current configuration and the proposed configuration with plugs set.

A Subsequent Report of Abandonment shall indicate the actual work completed. Attachments required with a Subsequent Report are a wellbore diagram showing plugs that were set and casing remaining in the hole, the job summaries from all plugging contractors used, including wireline and cementing (third party verification) and any logs that may have been run during abandonment.

OGCC Operator Number: 10459

Contact Name: Taylor Heffner

Name of Operator: EXTRACTION OIL &amp; GAS LLC

Phone: (720) 9742019

Address: 370 17TH STREET SUITE 5300

Fax:

City: DENVER

State: CO

Zip: 80202

Email: theffner@extractionog.com

For "Intent" 24 hour notice required,

Name: Peterson, Tom

Tel: (303) 815-9641

COGCC contact:

Email: tom.peterson@state.co.us

API Number 05-123-11395-00

Well Name: HIPPEN

Well Number: 1-32

Location: QtrQtr: NWNW

Section: 32

Township: 1N

Range: 68W

Meridian: 6

County: WELD

Federal, Indian or State Lease Number:

Field Name: WATTENBERG

Field Number: 90750

☒ Notice of Intent to Abandon☐ Subsequent Report of Abandonment

### Only Complete the Following Background Information for Intent to Abandon

Latitude: 40.012070

Longitude: -105.033290

GPS Data:

Date of Measurement: 04/25/2007

PDOP Reading: 1.6

GPS Instrument Operator's Name: Paul Tappy

Reason for Abandonment:

☐ Dry☒ Production for Sub-economic☐ Mechanical Problems☐ Other

Casing to be pulled:

☒ Yes☐ No

Estimated Depth: 1050

Fish in Hole:

☐ Yes☒ No

If yes, explain details below

Wellbore has Uncemented Casing leaks:

☐ Yes☒ No

If yes, explain details below

Details:

### Current and Previously Abandoned Zones

Formation	Perf. Top	Perf. Btm	Abandoned Date	Method of Isolation	Plug Depth
CODELL	8034	8042			
J SAND	8468	8478			
NIOBRARA	7599	7917			

Total: 3 zone(s)

### Casing History

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bot	Cement Top	Status
SURF	12+1/4	8+5/8	24	958	700	958	0	VISU
1ST	7+7/8	5+1/2	15.5	8,650	295	8,650	6,310	CALC

## Plugging Procedure for Intent and Subsequent Report

CIBP #1: Depth 7500 with 58 sacks cmt on top. CIPB #2: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top.  
CIBP #3: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top. CIPB #4: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top.  
CIBP #5: Depth \_\_\_\_\_ with \_\_\_\_\_ sacks cmt on top.

NOTE: Two(2) sacks cement required on all CIBPs.

Set 104 sks cmt from 1150 ft. to 808 ft. Plug Type: STUB PLUG Plug Tagged: ☒  
Set \_\_\_\_\_ sks cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Plug Type: \_\_\_\_\_ Plug Tagged: ☐  
Set \_\_\_\_\_ sks cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Plug Type: \_\_\_\_\_ Plug Tagged: ☐  
Set \_\_\_\_\_ sks cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Plug Type: \_\_\_\_\_ Plug Tagged: ☐  
Set \_\_\_\_\_ sks cmt from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Plug Type: \_\_\_\_\_ Plug Tagged: ☐

Perforate and squeeze at \_\_\_\_\_ ft. with \_\_\_\_\_ sacks. Leave at least 100 ft. in casing \_\_\_\_\_ CICR Depth

Perforate and squeeze at \_\_\_\_\_ ft. with \_\_\_\_\_ sacks. Leave at least 100 ft. in casing \_\_\_\_\_ CICR Depth

Perforate and squeeze at \_\_\_\_\_ ft. with \_\_\_\_\_ sacks. Leave at least 100 ft. in casing \_\_\_\_\_ CICR Depth

(Cast Iron Cement Retainer Depth)

Set 104 sacks half in. half out surface casing from 1150 ft. to 808 ft. Plug Tagged: ☐

Set 10 sacks at surface

Cut four feet below ground level, weld on plate Above Ground Dry-Hole Marker: ☐ Yes ☐ No

Set \_\_\_\_\_ sacks in rat hole Set \_\_\_\_\_ sacks in mouse hole

### Additional Plugging Information for Subsequent Report Only

Casing Recovered: \_\_\_\_\_ ft. of \_\_\_\_\_ inch casing

Plugging Date: \_\_\_\_\_

\*Wireline Contractor: \_\_\_\_\_

\*Cementing Contractor: \_\_\_\_\_

Type of Cement and Additives Used: \_\_\_\_\_

Flowline/Pipeline has been abandoned per Rule 1103 ☐ Yes ☐ No

\*ATTACH JOB SUMMARY

Technical Detail/Comments:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: \_\_\_\_\_

Print Name: Taylor Heffner

Title: Production Engineer

Date: \_\_\_\_\_

Email: theffner@extractionog.com

Based on the information provided herein, this Well Abandonment Report (Form 6) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_

Date: \_\_\_\_\_

**CONDITIONS OF APPROVAL, IF ANY:** \_\_\_\_\_

Expiration Date: \_\_\_\_\_

### Attachment Check List

**Att Doc Num**

**Name**

400919011	WELLBORE DIAGRAM
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Total Attach: 1 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)